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8023 Vantage Drive, Ste. 540
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Date: July 26, 2005

No. of Pages: 19

TO:

COMPANY: USPTO

FAX: 571-273-8300

FROM: Robert W. Mason

DEPARTMENT: Legal/IP

FAX: 210 255 6969

PHONE: (210) 255-6271

RE: App. No. : 09/937,942
Inventor : Johnson, Royce
Filed : October 2, 2001
Confirmation No. : 8824
Customer No. : 30159
Title : **NEGATIVE PRESSURE WOUND THERAPY SYSTEM
WITH PROVISION FOR INTRODUCTION OF AGENT**

Enclosed please find the following for filing in the referenced matter:

1. Transmittal Form;
2. Response to Final Office Action of May 26, 2005

I hereby certify that the attached correspondence is being facsimile transmitted to the above number (571-273-8300) on July 26, 2005.

Respectfully submitted,

Robert W. Mason

Reg. No.: 42,848

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Mailing:
P.O. Box 659508
San Antonio, Texas 78265-9508
1-800-531-5369/Fax 210-255-4450

Corporate:
8023 Vantage Drive
San Antonio, Texas 78230-4726
(210) 524-9000

Manufacturing:
4958 Stout Drive
San Antonio, Texas 78219-4334
(210) 662-0215

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

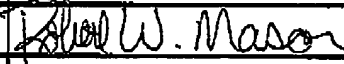
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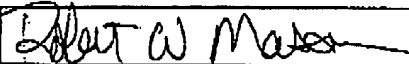
TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/937,942
	Filing Date	October 2, 2001
	First Named Inventor	JOHNSON, Royce
	Art Unit	3781
	Examiner Name	TRUONG, Linh T.
Total Number of Pages in This Submission	Attorney Docket Number	VAC.483.US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks <input style="width: 100px;" type="text"/>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	KINETIC CONCEPTS, INC.		
Signature			
Printed name	Robert W. Mason		
Date	07/26/2005	Reg. No.	42,848

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Robert W. Mason	Date	07/26/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****RECEIVED
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App. No. : 09/937,942 Confirmation No. 8824
Inventor : JOHNSON, Royce, W.
Filed : October 2, 2001
Group Art Unit : 3761
Examiner : TRUONG, Linh T.
Docket No. : VAC.483. US
Customer No. : 30159
Title : **NEGATIVE PRESSURE WOUND THERAPY SYSTEM WITH
PROVISION FOR INTRODUCTION OF AGENT**

MAIL STOP AMENDMENT
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37 C.F.R. § 1.8**

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26/07/2005
Date


Robert W. Mason

Response to Final Office Action Of May 26, 2005

Dear Sir or Madam:

In response to the Final Office Action of May 26, 2005, Applicant submits this Response in an effort to advance the progress of the application, and in an effort to provide the Examiner with details as to why the stated combination of references do not render obvious the present invention as claimed.

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.